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			Application Number	09/836,351				
TRANSMITTAL FORM (to be used for all correspondence after initial filing)			Filing Date	April 18, 2001				
			First Named Inventor	Jang-Jin Yoo				
			Art Unit	2871				
			Examiner Name	Timothy L. Rude				
Total Numb	er of Pages in This Submis	ssion 1	Attorney Docket Numb	8733.421.00-US				
	E	NCLOSURES (Check all that app	oly)				
X Fee Trans	smittal Form	Drawing(s)		After Allowance Communication to Group				
X Fee	Attached	Licensing-rela	ated Papers	Appeal Communication to Board of Appeals and Interferences				
Amendme	ent/Reply	Petition		Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)				
Afte	er Final	Petition to Co Provisional A	nvert to a oplication	Proprietary Information				
Affic	davits/declaration(s)	Power of Attor	ney, Revocation respondence Address	Status Letter				
X Extension	of Time Request	Terminal Disc		X Other Enclosure(s) (please identify below):				
Express A	bandonment Request	Request for F	Refund	Request for Continued Examination				
Informatio	n Disclosure Statement	CD, Number o	of CD(s)	(RCE) Transmittal				
Certified Copy of Priority Document(s)								
Response to Missing Parts/		Remarks						
Incomplete Application								
unde	oonse to Missing Parts er 37 CFR 1.52 or 1.53							
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	SIGNATU	IRE OF APPLICAN	NT, ATTORNEY, OR	AGENT				
Firm or ndividual name	MCKENNA LONG & ALDRIDGE LLP Valerie Hayes							
signature Valerie Hayes								
ate	March 25, 2004	0						

PTO/SB/17 (10-03) Approved for use through 7/31/2006. OMB 0651-0032

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FEE TRANSMITTAL		Complete if Known					Known			
LEE INANSMITTAL	-	Application Number				09/836,351				
for FY 2004		Filing Date				April 18, 2001				
Effective 10/01/2003, Patent fees are subject to annual revision.		First Named Inventor			entor	Jang-Jin Yoo				
Enective 10/07/2003, Patent fees are subject to annual revision.		Examiner Name				T. N. Ton				
Applicant claims small entity status. See 37 CFR 1.27		Art Unit				2871				
TOTAL AMOUNT OF PAYMENT (\$) 880.00		Attorney Docket No.				8733.421.00-US				
METHOD OF PAYMENT (check all that apply)	T	FEE CALCULATION (continued)								
X Check Credit Money Order Other None Deposit Account:	3. ADDITIONAL FEES									
Deposit 50,0044		Large Entity Small Entity								
Account Number 50-0911	Fee Code	Fee (\$)	Fee Code	Fee (\$)		Fee De	scription	Fee Paid		
Deposit Account McKenna Long & Aldridge LLP	1051	130	2051	65	Surcharge	e – late filing	fee or oath			
Name The Director is authorized to: (check all that apply)	1052	50	2052	25		e – late provi	sional filing fee or cover			
Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	sheet.	sh specificat	-			
X Charge any additional fee(s) or any underpayment of fee(s)	1812	2,520	1812			request for ex				
Charge fee(s) indicated below, except for the filing fee	1804	920*	1804	920*	Requestin	g publication	of SIR prior to			
to the above-identified deposit account.	1805	1,840*	1805	1.840	Examiner Requestin		of SIR after			
FEE CALCULATION	1251	110	2251	55	Examiner		nin first month	110.00		
1. BASIC FILING FEE	1252	420	2252	210			nin second month	110.00		
Large Entity Small Entity	1253	950	2253	475			nin third month			
Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254	1,480	2254	740			nin fourth month			
1001 770 2001 385 Utility filing fee	1255	2,010	2255	1 005						
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of A		nin fifth month			
1003 530 2003 265 Plant filing fee	1402	330	2402	165			of an appeal			
1004 770 2004 385 Reissue filing fee	1403	290	2403			r oral hearing				
1005 160 2005 80 Provisional filing fee	1451	1,510	1451				blic use proceeding			
SUBTOTAL (1) (\$) 0.00	1452	110	2452	55		revive – una				
SUBTOTAL (1) (\$) 0.00	1453	1,330	2453	665		revive - unintentional				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665		fee (or reiss				
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Total Claims 56 -56** = x = 0.00	1503	640	2503	320	Plant issue		į			
ndependent 3 -3** = x = 0.00	1460	130	1460	130		the Commis				
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arge Entity Small Entity	1806	ŀ					7 CFR 1.17(q)			
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Code (\$) Code (\$) <u>Fee Description</u>	8021	40	8021	40			assignment per of properties)] [
1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3	1809	770	2809	385		mission afte	r final rejection			
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	For each ad	ditional inve 37CFR 1.129	ention to be			
1204 86 2204 43 ** Reissue independent claims	1801	770	2801	385			Examination (RCE)	770.00		
over original patent 1205 18 2205 9 ** Reissue claims in excess of 20	1802	900	1802	900	Request for	expedited e				
and over original nates	Other fe	of a design application Other fee (specify)								
SUBTOTAL (2) (\$) 0.00		Reduced by Basis Filips Foe Poid								
**or number previously paid, if greater; For Reissues, see above	Necocce by Basic Filling Fee Paid SUBTOTAL (3) (\$) 880.00									
UBMITTED BY						(Complete	(if applicable))	===		
		gistration No. torney/Agent) 53,005				Telephone (202) 496-7564				
ignature Valerie Hayes						Date March 25, 2004				
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